VHA HANDBOOK 1173.14 Transmittal Sheet April 18, 2008

HOME IMPROVEMENTS AND STRUCTURAL ALTERATIONS (HISA) PROGRAM

- **1. REASON FOR ISSUE.** This Veterans Health Administration (VHA) Handbook updates Department of Veterans Affairs (VA) procedures for governing the Home Improvement and Structural Alterations (HISA) Program for veteran beneficiaries.
- **2. SUMMARY OF CHANGES.** This VHA Handbook provides current information regarding paragraph 4, Eligibility.
- **3. RELATED ISSUES.** VHA Directive 1173, VHA Handbooks 1173.1 through 1173.13, VHA Handbooks 1173.15 through 1173.17.
- **4. RESPONSIBLE OFFICE.** The Chief Prosthetics and Clinical Logistics Officer (10FP), is responsible for the contents of this VHA Handbook. Questions are referred to (202) 254-0440.
- **5. RESCISSIONS.** VHA Handbook 1173.14, dated July 2, 2007, is rescinded.
- **6. RECERTIFICATION.** This VHA Handbook is scheduled for recertification on or before the last working day of April 2013.

Michael J. Kussman, MD, MS, MACP Under Secretary for Health

DISTRIBUTION CO: E-mailed 4/22/08

FLD: VISN, MA, DO, OC, OCRO, and 200 – E-mailed 4/22/08

CONTENTS

HOME IMPROVEMENTS AND STRUCTURAL ALTERATIONS (HISA) PROGRAM

PARAGRAPH	PAGE
1. Purpose	1
2. Scope	1
3. HISA Grants	1
4. Eligibility	3
5. Chargable Improvement and Structural Alterations	3
6. Non-chargable Improvement and Structural Alterations	4
7. HISA Program Responsibilities of the Chief Prosthetics and Clinical Logistics Office	er 5
8. HISA Program Responsibilities of the Facility Director, (or the VISN Prosthetic Representative, when applicable)	5
9. Responsibilities of the Facility Responsibilities of the Facility HISA Committee	5
10. Responsibilities of the Chief, P&SAS	5
11. Responsibilities of the Purchasing Agent	7
12. Application Process for HISA Benefits	7
13. Costing	9
14. Inquiries	9

HOME IMPROVEMENTS AND STRUCTURAL ALTERATIONS (HISA) PROGRAM

1. PURPOSE

This Veterans Health Administration (VHA) Handbook establishes uniform and consistent Department of Veterans Affairs (VA)-wide procedures governing the Home Improvement and Structural Alterations (HISA) program for veteran beneficiaries. *NOTE:* Each individual case must be reviewed and evaluated based on the specific needs of the veteran involved; this is especially true where the patient presents multiple disabilities.

2. SCOPE

- a. Title 38 of the United States Code (U.S.C.), Section 1717, is the statutory authority for the Secretary of Veterans Affairs to provide HISA grants to eligible veterans. Title 38 U.S.C., Section 1717 (a)(2)(A) and (B) increased the lifetime benefit limitation for service connected veterans HISA benefits to \$4,100, and non-service connected veterans HISA benefits to \$1,200. NOTE: If future laws increase the current amounts beyond \$4,100 and \$1,200 respectively, veterans who previously used a HISA Grant will only be allowed to utilize the difference in the increased amount if they have an unused balance.
- b. The HISA benefit is limited to the improvement and structural alterations necessary only to ensure the continuation of treatment and/or to provide access to the home or to essential lavatory and sanitary facilities. *NOTE:* It does not include those improvements which would serve only to lend comfort to the individual, or to make life outside the health care facility more acceptable.

3. HISA GRANTS

- a. HISA grants provide for medically necessary improvements and/or structural changes to the veteran's residence for the following purposes:
 - (1) Allowing entrance to, or exit from, the veteran's residence.
 - (2) Use of essential lavatory and sanitary facilities.
 - (3) Allowing accessibility to kitchen or bathroom sinks or counters.
- (4) Improving entrance paths or driveways in immediate area of the home to facilitate access to the home by the veteran.
- (5) Improving plumbing or electrical systems made necessary due to installation of dialysis equipment in the home.
- b. All improvements must adhere to the Minimum Property Requirements (MPRs) as outlined in Department of Veterans Affairs (VA) Pamphlet 26-13, Handbook for Design, and VA Manual M26-12, Chapter 7, Section B. All improvements must meet, or exceed, local building authority requirements.

- c. Improvements can include, but are not limited to:
- (1) **Door Latches.** Door latch handles must be easy to operate and grasp.
- (2) **Entrances.** The minimum width of all doors needs to be 3 feet (36 inches). In renovation work where 3 foot openings are impossible, an opening of 2 feet 8 inches (32 inches) is acceptable; however, ingress and egress doorways, h must always be a minimum of 36 inches. A maneuvering area with a minimum length of 4 feet 6 inches (54 inches) must be provided on each side of all doors.
- (3) **Electrical Outlets and Wall Switches.** Wall mounted outlets must be located at a maximum height of 4 feet (48 inches) and a minimum height of 1 foot, 6 inches (18 inches).
- (4) **Handrails.** The primary functions of hand rails are to act as a safety barrier to protect the user from a fall, to aid with balance, or to allow a wheelchair user a means for propulsion. The railing can be of wood or metal that is a minimum 1.5 inches in diameter with a 1.5 2 inch clearance from the wall. The railing needs to be smooth, continuous, and uninterrupted in the vertical or horizontal plane. If used with a ramp, handrails must be provided on both sides.
- (5) **Ramps.** Permanent ramping constructed of wood or concrete must be built according to VA Minimum Property Requirements (see subpar. 3b).
- (6) **Windows.** Windows must have a maximum sill height of 2 feet, 9 inches (33 inches). Window controls must be accessible and easy to operate. Controls for windows are to be located at a maximum height of 3 feet, 6 inches (42 inches). Controls for curtains and blinds need to be similarly accessible. **NOTE:** Window tint or shades can be provided if prescribed and sufficient medical justification substantiates the need to block harmful sunrays from entering the primary living quarters.
- (7) **Central Air.** Central air systems may be provided, when prescribed to an eligible veteran suffering from a spinal cord injury, neurological conditions, and severe respiratory or coronary disease, which are substantially worsened by exposure to heat and humidity, and where the absence of a controlled environment subjects the veteran to health-threatening circumstances. **NOTE:** Room air conditioners are provided, if necessary, and are charged as a prosthetic item. If the need for a central air conditioning system exists, the medical justification must be sufficient to substantiate cooling an area beyond the primary living quarters (see VHA Handbook 1173.08).
- (8) **Flooring.** New or improved flooring can be provided for veterans when it is necessary for the veteran to navigate the interior of the home in order to access essential sanitary and lavatory facilities, e.g., if a veteran has a manual wheelchair and his home has carpeting that doesn't allow for optimum operation of the wheelchair, the HISA Grant may be used to remove the carpeting and replace it with vinyl or wood flooring or thinner carpet.

4. ELIGIBILITY

Veterans receiving medical services furnished under title 38 U.S.C., Section 1710(a)(1) or for a disability described in section 1710(a)(2)(C) are eligible for:

- a. A \$4,100 lifetime HISA benefit when it is necessary for:
- (1) A service-connected condition.
- (2) A non-service-connected condition of a veteran rated 50 percent or more service connected.
- (3) A non-service-connected condition of a veteran in receipt of benefits under 38 U.S.C., Section 1151 for the condition requiring such benefit.
- b. A \$1,200 lifetime HISA benefit all other veterans receiving medical services furnished under title 38 U.S.C. 1710(a)(2) and (3).

NOTE: If the veteran has a balance remaining when, or if, Congress passes an increase in the lifetime limit, the veteran will be eligible for the difference between what remains from the original balance and the new limitation, subject to reapplication. However, if the benefit has been exhausted, no new benefit is allowed regardless of the increase in limitation. If a veteran receives a change in their rating decision from "non-service connected" to "service connected" after the veteran has used the non-service-connected grant, the veteran is entitled to the difference in amounts. In total, the veteran may not receive more than the current service connected amount.

5. CHARGABLE IMPROVEMENT AND STRUCTURAL ALTERATIONS

Improvement and structural alterations <u>chargeable</u> against the veteran's cost limitation include, but are not limited to:

- a. Roll-in showers or walk-in bathtubs.
- b. Construction of wooden or concrete permanent ramping to provide access to the home.
- c. Widening doorways to bedroom, bathroom, etc., to achieve wheelchair access.
- d. Lowering of kitchen or bathroom counters and sinks.
- e. Improving entrance paths and driveways in the immediate area of the home to facilitate access to the home, to include concrete pads for wheelchair lifts utilized for ingress and egress from vehicle.
- f. Interior and exterior railing or lighting deemed necessary for patients with ambulatory capability or for veterans rated legally blind.

- g. Improvements to plumbing or electrical systems made necessary due to the installation of dialysis or other sanitary equipment in the home.
- h. Any cost associated with permits, inspection fees, etc., that are required by local ordinances.

6. NON-CHARGABLE IMPROVEMENT AND STRUCTURAL ALTERATIONS

Improvements and structural alterations, which <u>are not chargeable</u> against the veteran's HISA limitation include:

- a. Exterior decking (in excess of 8 foot by 8 foot or the area necessary to accommodate wheelchair access).
 - b. Construction of pathways to exterior buildings such as barns or workshops.
- c. Widening driveways (in excess of 8 foot by 8 foot, or an area necessary to accommodate wheelchair and van lifts).
 - d. Purchase or installation of spa, hot tub, or jacuzzi-type tubs.
- e. Purchase of removable equipment or appliances such as portable ramps, porch lifts, and stair glides. *NOTE:* These removable items are chargeable as a prosthetic item and not HISA.
- f. Projects which would duplicate services previously or currently being provided by the Veterans Benefits Administration (VBA) Specially Adapted Housing (SAH) grant, such as: ramping, central air conditioning, and roll-in showers. HISA and SAH are mutually exclusive of each other; however, they may be used concurrently.
- (1) Prosthetic Service needs to work closely with the SAH agent to ensure the veteran's grants are used in the most efficient way possible. Prosthetic Service is only to give the HISA grant for a specific project within the SAH construction or renovation. All the rules and requirements for obtaining HISA still apply, except for acquiring three bids and plans, as that has already been performed by the SAH agent and veteran for the larger SAH project.
- (2) The SAH agent is responsible for providing Prosthetic Service all pertinent information under subparagraphs 12b(3) and 12c of this Handbook.
- (3) The SAH agent must notify Prosthetics when improvements have been inspected and approved by the VA compliance inspector.
 - g. Purchase or installation of home security systems.
- h. Routine repairs done as part of regular home maintenance, e.g., replacing roofs, furnaces, air conditioner, etc. *NOTE:* Repairs or improvements to previous HISA projects can be authorized within the benefit limit; however, the veteran must reapply to use remaining grant allotment.

7. HISA PROGRAM RESPONSIBILITIES OF THE CHIEF PROSTHETICS AND CLINICAL LOGISTICS OFFICER

The Chief Prosthetics and Clinical Logistics Officer (10FP), is responsible for monitoring the HISA Program to ensure appropriate funding and consistency in the administration of the HISA benefits.

8. HISA PROGRAM RESPONSIBILITIES OF THE FACILITY DIRECTOR, (OR THE VISN PROSTHETIC REPRESENTATIVE

The facility Director, (or the VPR, when applicable) has responsibility for:

- a. Publishing local facility policy memoranda to inform staff, Veterans Service Organizations (VSOs), and veterans of the procedures to follow to obtain HISA benefits.
- b. Establishing a facility HISA Committee that must consist of such staff physicians, therapists, nurses, social workers, patient representatives, the SAH agent from VBA, and representatives of the VSOs as are deemed necessary.
- c. Appointing the Chief, Prosthetic and Sensory Aids Service (P&SAS), as the committee coordinator and to serve as the veterans' point of contact.

9. RESPONSIBILITIES OF THE FACILITY HISA COMMITTEE

The facility HISA Committee is responsible for:

- a. Determining if the veteran has received the SAH grant for the item(s) requested by contacting the SAH agent at VBA.
 - b. Evaluating, and approving or disapproving the request and bid.
- c. Referring the request to the appropriate VA facility, iIn the event the veteran resides outside the local Prosthetic Primary Service Area (PSA).

10. RESPONSIBILITIES OF THE CHIEF, P&SAS

The Chief, P&SAS, or designee, is to:

- a. Actively publicize the HISA Programs in order to identify eligible veterans and inform them of their benefits.
- b. Assist designated Committee members in becoming familiar with the applicable guidelines for administering the HISA Program.
 - c. Screen applications to ensure that:
 - (1) There is no duplication of benefits,

- (2) The benefit is used appropriately, and
- (3) The application is complete prior to presentation to the HISA Committee.
- d. Present the complete application to the Committee members for approval or disapproval.
- e. Communicate the Committee's decision to the applicant.
- f. Authorize the licensed or bonded contractor to proceed with the project, if approved.
- g. Review the SAH benefits as administered by VBA to avoid any duplication of benefits, e.g., SAH provision of accessible bathroom would eliminate future need for bathroom modifications, central air conditioning provided under SAH cannot be repaired or replaced under HISA, etc.
- h. Administer the appropriate obligations to the contractor to facilitate the completion of the approved project. If a licensed or bonded contractor is not utilized, the Chief, P&SAS, is responsible for notifying the facility Engineering Service at the local facility to inspect the property to ensure compliance with established guidelines.
- i. Authorize claims for prompt payment, or reimbursement, of costs or services performed (without prior authorization), when:
- (1) The veteran meets both the legal eligibility and medical criteria for the modifications for which reimbursement is sought, and
- (2) The claim is submitted within 30 days of the date that the improvement or alteration was performed, or
- (3) Documented evidence indicates that an application was made for the actual home modification, or a VA physician recommended furnishing the improvement or alteration before the work was performed. *NOTE:* Follow-up on approved projects as to the status is the responsibility of the Chief, P&SAS.
- j. Ensure, that if the work on a project has begun and is cancelled for any reason (i.e., veteran death or relocation, etc.), the vendor is paid for the portion of the work completed.
- k. Perform random inspections of fifteen projects per year where the VA provided modifications. Any deficiencies noted during the inspections must be addressed accordingly by the Chief of Prosthetics.
- (12) Ensure all projects are completed in compliance with Minimum Property Requirements (see subpar. 3c).

11. RESPONSIBILITIES OF THE PURCHASING AGENT

The Purchasing Agent is responsible for:

- a. Initiating the purchase order utilizing the correct costing center, budget object code (BOC), and posting to Prosthetic Veterans Health Information System and Technology Architecture (VistA) on each veteran's VA Form 10-2319 (ADP), Records of Prosthetic Service, utilizing the appropriate Health Care Financing Administration Common Procedure Coding System (HCPCS) code.
- b. Reconciling all charges for payment and posting any HISA benefit balance in the remarks section of VA Form 10-2319.

12. APPLICATION PROCESS FOR HISA BENEFITS

- a. A prescription from a VA, or fee-basis physician for HISA modifications is required and must include the following:
- (1) The specific item(s) needed, such as: wheelchair ramp, widening of doorways, bathroom modifications. *NOTE:* If the physician needs assistance in determining what modifications are needed, the patient is to be referred to Physical Medicine and Rehabilitation Service for consultation.
 - (2) Diagnosis and medical justification for the item or modification(s) requested.
- (3) Veteran's name, address, last four digits of Social Security Number (SSN), and phone number.
 - b. The veteran <u>must</u> provide the following:
- (1) A completed and signed VA Form 10-0103, Veterans Application for Assistance in Acquiring HISA.
- (2) If the veteran leases or rents a home, a written statement from the owner of the property authorizing the project to be done. *NOTE:* The veteran is responsible for all costs above the limit to which the veteran is entitled.
- (3) Three competitive bids from licensed or bonded contractors, if required by state law. However, if the veteran is unable to obtain three bids, one bid may be sufficient as long as it is documented as a sole source. **NOTE:** The local Prosthetic Service staff, taking steps to avoid specific recommendations, may supply a list of contractors who have provided prior services to assist veterans in finding available contractors. Each bid must include the following:
- (a) The contractor's name, address, telephone number, and last four digits of SSN or Federal tax identification (ID) number along with the contractor's applicable license and bonding information.
 - (b) The veteran's name, address, and telephone number.
- (c) A written statement and the plans for the project that is to be performed to include a detailed drawing or sketch of the work to be completed.

- (d) An itemized list of materials, material costs, and labor costs for each part of the project.
- (e) The total cost for labor and materials for the entire project.
- (f) Permits, if required by local government agency. <u>Obtaining permits is the licensed or bonded contractor's responsibility.</u>
 - (4) A signed acknowledgement that VA:
 - (a) Assumes no responsibility for maintenance, item repair or replacement;
 - (b) Assumes no liability for the product;
 - (c) Extends no warranties, either expressed or implied;
- (d) Assumes no liability for damage caused by such equipment or devices, or for their removal, when the equipment or device(s) is no longer needed or wanted.
 - c. The following is required from the contractor.
 - (1) The contractor must:
 - (a) Be willing to accept a government purchase order.
 - (b) Understand that the payment will not be made until completion of the authorized work.
- (c) Understand that the receipt of a signed letter of satisfaction from the veteran and a photo of the completed work must be submitted with final invoice.
 - (d) Obtain all required permits.
 - (e) Comply with all state and local building codes.
- (f) Certify, upon completion, that the work meets, or exceeds VA Minimum Property Requirements and VA specifications as contained in the scope of work.
 - (g) Warrant the work against defects or poor workmanship for at least 1 year.
- (h) Include a statement that certifies the charges contained in the invoice do not exceed the usual and customary charges for that type of work.
 - (2) Contractor bids must provide a complete description of the proposed project to include:
- (a) A detailed and dimensioned set of construction plans of the area to be altered, or improved, as it currently appears. It must show the location of permanent fixtures such as walls, doors, windows, shower stalls, driveways, or walks, if appropriate. The plans must include measurements and specifications of these items.

- (b) A detailed and dimensioned set of construction plans showing the area <u>as it will appear</u> after the proposed project including a photo of the proposed work site prior to the approval of the bid. **NOTE:** The items mentioned in preceding subparagraph 7c(2)(a), need to be shown with the new specifications and measurements.
- (c) If a ramp is to be constructed, an individual detailed and dimensioned set of construction plans of the ramp indicating type of construction materials, slope width, and slope height.
- <u>1</u>. The slope of a ramp cannot be approved if it exceeds 1 inch increase in height per running foot of ramp. In general, a ramp cannot be approved if it has more than 5 percent grade, or has a maximum slope of 1:12 or less.
- <u>2</u>. A new ramp or walkway must have a minimum width of 48 inches, and must be constructed to be non-slip, or be treated to prevent slipping when wet.
- a. Any ramp must include railings and low curb or guard rails on both sides to prevent a wheelchair or scooter from running off the edges.
- <u>b</u>. A 5'x 5' rest platform must be provided every 30 feet or less depending on the design, or the veteran's ability. **NOTE:** VA Minimum Property Requirements are the standard for VHA (see subpar. 3c).
- (d) If a driveway or walkway is to be improved, information about the material composing the existing area, such as: gravel, concrete, asphalt, etc. *NOTE:* Requirements for slope are the same as ramp requirements.

13. COSTING

HISA program costs are posted to the appropriate Cost Center on each veteran's VA Form 10-2319, utilizing the appropriate HCPCS code.

14. INQUIRIES

Unusual requests, waivers from the VA Minimum Property Requirements, or inquiries relating to the HISA Program that cannot be resolved by the local HISA Committee are to be referred to the Chief Prosthetics and Clinical Logistics Officer (10FP), VA Central Office, Washington, DC, by submitting a VA Form 10-2641, Authority for Issuance of Special or Experimental Appliances. *NOTE:* This review is intended to expedite a resolution of unusual requests or inquiries; it is not to be considered as a substitute for the normal process.